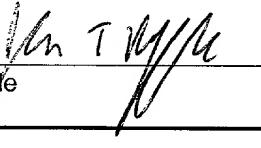
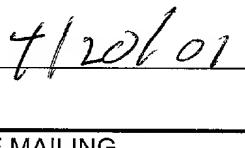
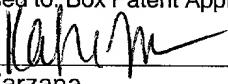


02/01

4-23-01

A

Utility Patent Application Transmittal		Attorney Docket No.: G-1 First Inventor: Jean Woloszko et al. Title: Bipolar Electrosurgical Clamp for Removing and Modifying Tissue Express Mail Label No.: ET160368020US
APPLICATION ELEMENTS		ADDRESS TO: Assistant Commissioner for Patents Box Patent Application Washington, D.C. 20231
1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g. PTO/SB/17) 2. <input checked="" type="checkbox"/> Applicant claims small entity status. 3. <input checked="" type="checkbox"/> Specification - Total Pages <u>88</u> - Descriptive title of the invention - Cross Reference to Related Applications - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings - Detailed Description - Claims - Abstract of the Disclosure 4. <input checked="" type="checkbox"/> Drawings – Total Sheet <u>54</u> 5. <input checked="" type="checkbox"/> Oath or Declaration – Total Pages <u>1</u> a. <input checked="" type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) i. <input type="checkbox"/> Deletion of Inventors 6. <input checked="" type="checkbox"/> Application Data Sheet 7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) 8. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission a. <input type="checkbox"/> Computer Readable Form b. <input type="checkbox"/> Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R or ii. <input type="checkbox"/> paper c. <input type="checkbox"/> Statements verifying identity of above copies		
ACCOMPANYING APPLICATION PARTS 9. <input checked="" type="checkbox"/> Assignment Papers (cover sheet/documents) 10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney 11. <input type="checkbox"/> English Translation Document 12. <input type="checkbox"/> Information Disclosure Statement (PTO-1449) 13. <input type="checkbox"/> Preliminary Amendment 14. <input checked="" type="checkbox"/> Return Receipt Postcard 15. <input type="checkbox"/> Certified Copy of Priority Document 16. <input type="checkbox"/> Request and Certification under 35 USC 122(b)(2)(B)(i) 17. <input type="checkbox"/> Other _____		
18. <input checked="" type="checkbox"/> If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76. <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input checked="" type="checkbox"/> Continuation-in-Part (CIP) of prior application No.: <u>09/780,745</u> filed <u>February 9, 2001</u> Prior application information: _____ Examiner: _____ Group Art Unit: _____ For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5B is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation <u>can only</u> be relied upon when a portion has been inadvertently omitted from the submitted application parts.		
19. Correspondence Address: Customer Number 021394		
 John T. Raffie Reg. 38,585		 Date <u>4/20/01</u>
CERTIFICATE OF MAILING		
I hereby certify that this is being deposited with the United States Postal Service "Express Mail Post Office To Addressee" service under 37 CFR 1.10 on the date indicated below, Express Mail Label No. <u>ET160368020US</u> and is addressed to: Box Patent Application, Assistant Commissioner for Patents, Washington, D.C. 20231  Katie Zarzana		
Date <u>4/20/01</u>		

JC971 09/839427 PTO

04/20/01

**FEE TRANSMITTAL
for FY 2001**

Application No.: unassigned

Filing Date: April 20, 2001

First Named Inventor: Jean Woloszko et al.

Examiner Name: unassigned

Group Art Unit: unassigned

TOTAL AMOUNT OF PAYMENT \$1,145.00

Attorney Docket No.: G-1

METHOD OF PAYMENT

1. The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account No. 50-0359

ArthroCare Corporation

Charge any additional fee required under 37 CFR 1.16 and 1.17

Applicant claims small entity status.

2. Payment Enclosed

FEE CALCULATION

1. [X] BASIC FILING FEE

Large Entity	Small Entity	Fee	Fee	Fee	Fee Description	Fee Paid
Code (\$)	Code (\$)	Code (\$)	Code (\$)	Code (\$)	Code (\$)	Code (\$)
101 710	201 355				Utility filing fee	
106 320	206 160				Design filing fee	
107 490	207 245				Plant filing fee	
108 710	208 355				Reissue filing fee	
114 150	214 75				Provisional filing fee	
SUBTOTAL (1) \$355						

2. [X] EXTRA CLAIM FEES

		Fee from Extra Claims below	Fee Paid
Total Claims	90	- 20** = 70	x 9 = 630
Independent	7	- 3** = 4	x 40 = 160
Claims			
Multiple Dependent			

Large Entity	Small Entity	Fee	Fee	Fee	Fee Description	Fee Paid
Code (\$)	Code (\$)	Code (\$)	Code (\$)	Code (\$)	Code (\$)	Code (\$)
103 18	203 9				Claims in excess of 20	
102 80	202 40				Independent claims in excess of 3	
104 270	204 135				Multiple dep. Claim	
109 80	209 40				**Reissue indp. over orig.	
110 18	210 9				**Reissue clms over 20	
SUBTOTAL (2) \$790						

**or number previously paid, if greater; For Reissues, see above

*Reduced by Basic Filing Fee Paid

SUBMITTED BY:

John T. Raffle
Reg. 38,583
Ph: (408) 736-0224

Date

4/20/01

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity	Small Entity	Fee	Fee	Fee	Fee Description	Fee Paid
Code (\$)	Code (\$)	Code (\$)	Code (\$)	Code (\$)	Code (\$)	Code (\$)
105 130	205 65				Surcharge - late filing fee or oath	
127 50	227 25				Surcharge - late provisional filing fee or cover sheet	
139 130	139 130				Non-English specification	
147 2,520	147 2,520				Request for ex parte reexamination	
112 920*	112 920*				Requesting publication of SIR prior to Examiner Action	
113 1,840	113 1,840				Requesting publication of SIR after Examiner Action	
115 110	215 55				Extension for reply within 1 st month	
116 390	216 195				Extension for reply within 2 nd month	
117 890	217 445				Extension for reply within 3 rd month	
118 1,390	218 695				Extension for reply within 4 th month	
128 1,890	228 945				Extension for reply within 5 th month	
119 310	219 155				Notice of Appeal	
120 310	220 155				Filing a brief in support of an appeal	
121 270	221 135				Request for oral hearing	
138 1,510	138 1,510				Petition to institute a public use proceeding	
140 110	240 55				Petition to revive - unavoidable	
141 1,240	241 620				Petition to revive - unintentional	
142 1,240	242 620				Utility issue fee (or reissue)	
143 440	243 220				Design issue fee	
144 600	244 300				Plant issue fee	
122 130	122 130				Petitions to the Commissioner	
123 50	123 50				Processing fee under 37 CFR 1.17(q)	
126 180	126 180				Submission of IDS	
581 40	581 40				Recording assignment per property	
146 710	246 355				Filing a submission after final	
149 710	249 355				For each additional invention to be examined	
179 710	279 355				Request for Continued Examination	
169 900	169 900				Request for expedited examination of a design application	

Other fee: _____

SUBTOTAL (3) \$ _____